**IN CASE OF EMERGENCIES**

PLANNED LOCATION INFORMATION FOR TRAIL WORKERS, MONITORS AND HIKERS

Check-in:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name: |  | | Date of Activity: | |  | |
| Type of Work or Activity Planned: |  | | Location(s) (attach map if feasible): | |  | |
| The Car I Am Driving: | Make: | Model: | | Color: | | License: |
| Where I will Park (list as many as apply): |  | | Where I Will Work or Hike: | |  | |
|  | |  | |
|  | |  | |
|  | |  | |
| Cell Phone Number (if carrying one): |  | | When I Expect to Return Home: | |  | |
| Other Devices I Carry that May Assist in Finding Me: |  | | | | | |
| Contact person familiar with trails/location: |  | | | | | |
| If no contact made, take the following action: |  | | | | | |

Checkout:

● Volunteer must contact their Person Of Contact (POC) by the designated return time.

● If no contact is received by the designated return time:

o POC will:

▪ Attempt to contact the Volunteer by phone and then other means which may include: a satellite messenger device, Trip Leader (if any), or other known/listed companions on the workday.

▪ Use emergency phone numbers provided by club, or 911, to notify emergency responders.

▪ Notify the Organization Supervisor or designated Organization contact. o Organization Leader / Supervisor will:

▪ Notify APPA Safety Officer at 304-650-2677 and appropriate Land Managing Agency contact.

▪ Offer assistance to emergency responders, as resources permit.